

LEGENDARY LODGE

2024 Financial Assistance Request Form

Through the generosity of grants and donations to Legendary Lodge, we are very happy to offer financial assistance to help offset or pay the cost of sending a child to camp. Our goal is to make the summer camp experience accessible to *all*.

If you are in need of financial assistance this season, please complete this form and submit it via email to: *legendarylodge@diocesehelena.org*. Or, mail it to:

Legendary Lodge c/o Alex Kautzky PO Box 1729 Helena, MT 59624

Reservation Details

Spots at camp are not reserved until registration is complete and at least the \$100 deposit for camp has been paid. We encourage families, if possible, to register their camper(s) and pay the deposit before beginning this form.

If you are unable to afford the initial deposits, please contact our us at: 406-389-7068, or email: legendarylodge@diocesehelena.org, and we will be happy to help you get your campers registered.

Parish/Local Scholarships

There are many parishes and parish groups in the Diocese of Helena who offer scholarships for camp every year! If you are interested in taking advantage of local scholarships in your area, we encourage you to contact your Pastor or parish office to see what is available. Taking advantage of parish scholarships, or using them in conjunction with our financial assistance, helps us to spread out our funds further, helping even more campers get to camp!

Financial Assistance Contact:

Alex Kautzky, Camp Director Phone: 406-389-7068

Email: legendarylodge@diocesehelena.org

Applicant Information

Address:	_ City:	State: Zip:		
Phone: E	mail:			
Camper #1		Camper #2		
Name:		Name:		
Grade (In Fall 2024):		Grade (In Fall 2024):		
Desired (or registered) Camp Week	:	Desired (or registered) Camp Week:		
	\rightarrow			
Camper #3		Camper #4		
Name:		Name:		
Grade (In Fall 2024):		Grade (In Fall 2024):		
Desired (or registered) Camp Week	:	Desired (or registered) Camp Week:		
Have you already registered the camp	er(s) listed a	above? 🗆 Yes 🗆 No		
Parish Information				
Camper(s) Parish Name:		City:		
Parish Phone:	_ Parish Em	ail:		
Are you receiving any scholarship func	s from loca	l parish/parish organization? □ Yes □ No		
Amount Contributed From Parish/Org	anization: \$			
Other Organizations				
Are you receiving any scholarship func	s from any	other organization? \square Yes \square No		
Organization Name:	Contact Name:			
Contact Phone: Am	Amount Contributed From Organization: \$			

Total income according to 2022 Tax Return*: \$					
*This information can be fou	und on: Line 22 on Form 10	40 / Line 15 on Form 1040A	A / Line 4 on Form 1040EZ		
Special Circumstan	nces				
Please list <u>any</u> circumstances that should be taken into consideration below:					
Parent / Guardian Signa	ature:	Dat	e:		
	Thank you for con	aplating this form			
Thank you for completing this form.					
Please return it via the email or mailing address listed on the front page. We will contact you shortly to continue the registration process.					
This process is confidential. Your information will not be shared.					
OFFICE USE ONLY					
	OFFICE C	JSE UNLT	Γ		
Paid Deposit: \$	Awarded: \$	Date:	Initials:		
Notes:					

Financial Information